

(A Unit of Sparsh Multispecialty Hospital Private Limited) (Formerly known as Paedia Health Private Limited ) CIN: U85110CT2005PTC017751



UHID

: 154872

: MRS. KRITIKA SHRIVASTAVA

AGE/SEX

PATIENT NAME

: 31Y/FEMALE

CONSULTANT DOCTOR : HOSPITAL CASE

VISITID

: 0000288263

ORDER DATE : 24/09/2022 9:55:00AM

SAMP. DATE

: 24/09/2022 10:57:00AM

SPEC. NO

: 10392981

RESULT DATE: 24/09/2022 3:44:00PM

TPA

: MEDIWHEEL

# DEPARTMENT OF PATHOLOGY

# ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
ECD	45 mm at end of 1 hr	High	0 - 20	
ESR				

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**TECHNICIAN** 

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#### **DEPARTMENT OF PATHOLOGY**

LFT (LIVER FUNCTION T	ST)		
PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	0.32 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.17 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.15 mg/dt · · ·	Normal	0.1 - 0.4
ALKALINE PHOSPHATASE	94 U/L	Normal	0 - 240
SGOT	112 U/L	High	0 - 46
SGPT	22 U/L	Normal	0 - 40
TOTAL PROTEIN	7.39 g / dl	Normal	6 - 8
ALBUMIN	4.41 g/dl	Normal	4.1 - 5.3
GLOBULIN	2.98 g/dl	Normal	2 - 3.5
A.G.RATIO	1.48:1		1 - 2.5

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01/10/2022 9:14AM

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#### **DEPARTMENT OF PATHOLOGY**

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
PHYSICAL EXAMINATION				
QUANTITY	10 ml	. a	· . · · · · · · · · · · · · · · · · · ·	
COLOUR	Straw			
APPEARANCE	Clear			
REACTION	Acidic			
CHEMICAL EXAMINATION				
ALBUMIN	Nil		-	
SUGAR .	Nil			
MICROSCOPIC EXAMINATION				
EPITHELIAL CELLS	2-3 /hpf		0 - 5	
PUS CELLS	1-2 /hpf		1 - 2	
RBC	Nil /hpf			
CAST	Nil /lpf			
CRYSTAL	Nil			
AMORPHOUS MATERIAL DEPOSIT	Nil		· · · · · · · · · · · · · · · · · · ·	
OTHERS	Nil		-	

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#### DEPARTMENT OF PATHOLOGY

### HBA1c (GLYCOSYLATED HAEMOGLOBIN)

**PARAMETER** 

VALUE

RESULT

REFERENCE RANGE

HBA1 C (GLYCOSYLATED HEAMOGLOBIN)

6.5 %

High

4 - 6

Interpretation

As per American diabetes Association (ADA)

Reference Group

- HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0 At risk (Prediabetes) ->= 6.0

- >= 6.0 to < = 6.5

Diagnosing diabetes

->=6.5

Therapeutic goals for glycemic control

- Age> 19 years

- Goal of therapy: <7.0

Action suggested: >8.0

- Age < 19 years

- goal of therapy: < 7.5

#### Note

- 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.
- 2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid be appopriate.

#### Comments

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemic control as compared to blood and urinary glucose determination.

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### DEPARTMENT OF PATHOLOGY

#### **T3,T4 TSH**

**PARAMETER** 

T3 (TRIIODOTHYRONINE) T4 (THYROXINE)

TSH (THYROID STIMULATING HORMONE)

VALUE

1.684 ng/ml 54.29 ng/ml

3.658 uIU/ml

RESULT

REFERENCE RANGE Normal 0.69 - 2.15

Normal Normal

52 - 127 0.3 - 4.5

REFERENCE GROUP

REFERENCE RANGE in uIU/mL

As per American Thyroid Association

Adult Females (> 20 years)

Pregnancy

0.30 - 4.5

1st Trimester 2nd Trimester

0.10 - 2.50

3rd Trimester

0.20 - 3.00 0.30 - 3.00

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured

1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

#### Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease

Pregnancy associated thyroid disorders

Thyroid dysfunction in infancy and early childhood

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# **DEPARTMENT OF PATHOLOGY**

**URINE SUGAR PP** 

**PARAMETER** 

**TECHNICIAN** 

VALUE

RESULT

REFERENCE RANGE

URINE FOR SUGAR

Nil

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# **DEPARTMENT OF PATHOLOGY**

# **BLOOD SUGAR - FASTING AND PP**

**PARAMETER** 

**BLOOD SUGAR PP** 

**BLOOD SUGAR FASTING** 

VALUE

112 mg/dL

126 mg/dL

RESULT

REFERENCE RANGE

harma

Normal Normal

80 - 120 120 - 140

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# **DEPARTMENT OF PATHOLOGY**

CREATININE

PARAMETER CREATININE

VALUE

1.0 mg / dl

RESULT Normal

REFERENCE RANGE

0.6 - 1.2

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# DEPARTMENT OF PATHOLOGY

**URINE SUGAR FASTING** 

**PARAMETER** 

URINE FOR SUGAR

VALUE

Nil

RESULT

REFERENCE RANGE

Washarima

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# **DEPARTMENT OF PATHOLOGY**

**BLOOD GROUPING AND RH TYPING** 

PARAMETER **BLOOD GROUP** 

VALUE

"A"

RH FACTOR

Positive

RESULT

REFERENCE RANGE

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# DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	DEG	V	
BUN (BLOOD UREA NITROGEN)		RESULT	REFERENCE RANGE	
BUN (BLOOD UREA NITROGEN)	7.47 mg / dl			
GGT (GAMMA GLUTAMYL TRANSFERASE)	7.47 mg / ai	Low	8 - 23	
GGT (GAMMA GLUTAMYL TRANSFERASE)	16 U/L	Normal	5 - 36	
URIC ACID			- 50	
URIC ACID	2.15 / "			
·	3.15 mg/dL	Normal	2.5 - 6.8	

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# **DEPARTMENT OF PATHOLOGY**

	- THE PART OF P	AIRULUGY	
CBC (COMPLETE BLOOD PARAMETER HAEMOGLOBIN (Hb) TOTAL RBC COUNT	COUNT) VALUE 9.7 gm%	<b>RESULT</b> Low	REFERENCE RANGE 12 - 16
HAEMATOCRIT (PCV) RBC INDICES MCV	5.04 Million/cumm 31.2 %	Normal Low	4.5 - 5.1 35.9 - 44.6
MCH MCHC RDW	61.9 fl 19.3 pg 31.2 % 19.0 %	Low Low Low High	78 - 96 27 - 32 33 - 37 11 - 16
TOTAL WBC COUNT (TLC) DIFFERENTIAL COUNT NEUTROPHILS LYMPHOCYTES EOSINOPHILS MONOCYTES BASOPHILS BANDS BLAST	8500 /cumm  66 % 26 % 04 % 04 % 00 % 00 % 00 %	Normal Normal Normal Normal Normal Normal	4000 - 11000 0 - 75 22 - 48 0 - 6 2 - 10 0 - 2 0 - 5
PLATELET COUNT	270000 /cumm	Normal	150000 - 450000

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# **DEPARTMENT OF PATHOLOGY**

LIPID PROFILE		PATHOLOGY	
PARAMETER CHOLESTEROL TOTAL TRIGLYCERIDES - SERUM HDL LDL VLDL VLDL CHOL: HDL Ratio LDL: HDL Ratio	VALUE  142 mg / dl  70 mg / dl  65.08 mg / dl  62.92 mg/dL  14.0  2.18:1  0.97:1	RESULT Low Normal Normal Low Low	REFERENCE RANGE 150 - 220 60 - 165 35 - 80 90 - 160 20 - 50 3.5 - 5.5

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Category

: DR. HOSPITAL CASE : MEDIWHEEL

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: 24/09/22 04:38PM

X-RAY

X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.
- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

#### **IMPRESSION**

- No Remarkable Abnormality Detected .
- Please correlate clinically

Dr. SAMIR KATHALE MBBS, DNB(RADIO), MNAMS, MANBD Fetal Ultrasound & Fetal Medicine (FGi-BFMC) Reg No: CGMD-4404/2012

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Category

: DR. HOSPITAL CASE

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### **SONOGRAPHY USG WHOLE ABDOMEN**

\* LIVER : Normal in size, shape & echo texture with smooth margins. IHBRs are not dilated. No focal lesions seen. \*PORTO CAVAL SYSTEM: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein

\*COLLECTING DUCT & CBD:Normal in size and have echo lucent lumen.

\*GALL BLADDER :Seen in distended state with normal wall and lumen is echofree

\*SPLEEN:Normal in size, shape & echo texture. No focal lesions seen.

\*PANCREAS:Pancreatic head, body & tail visualized and have ,normal size,shape & echo texture.

\*KIDNEYS: Both kidneys are of normal shape, size and position.

Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus

\*URINARY BLADDER: Seen in distended state and has normal wall architecture. Lumen is echo free.

\*UTERUS: Anteverted normal in shape, size and echotexture. (Measures 7.86 x 5.29 x 3.63 cms.). Endometrial echo is central and shows normal thickness . Myometrium shows homogenous echotexture.

Small Subserosal Uterine fibroid of size 19 x 17.6 mm is seen in fundal region anteriorly.

\*BOTH OVARIES: Both the ovaries are normal in shape, size & echotexture.

No free fluid is seen in the peritoneal cavity.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

#### FINAL IMPRESSION:

Small Subserosal Uterine fibroid

Please correlate clinically , followup USG is recommended.

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Consultant	: DR. HOSPITAL CASE	Order Date	: 24/09/2022 9:55AM
^ .	: DR. HOSPITAL CASE : MEDIWHEEL	Samp.Date Report Date	: : 24/09/22 03:16PM

# SONOGRAPHY (BOTH BREAST)

#### REPORT :

- Both breasts are showing normal fatty tissue and glandular structures.
- No evidence of any obvious mass lesion, solid or cystic lesions or abnormal echotexture is seen.
- Superficial planes also show no significant abnormality.

#### **IMPRESSION:**

- No remarkable Abnormality detected in the current scan.
- Please correlate clinically

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